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The prevalence of typhoid fever is, as elsewhere, chiefly in the towns and ascribable to impure water, a cause now rapidly in process of elimination by the construction of waterworks, at least in the larger cities.

Typhus fever is, at all times, a rare malady in Japan, and even the favorable conditions existing during and immediately after the recent war have had little effect in developing it.

Diphtheria, although it may have before existed in Japan, was first distinctly recognized about 1875, since which time it appears to have gradually, though slowly, increased in frequency. However, this disease in Japan can not, even now, be considered as of so malignant a character as when occurring in Europe and America. The reported proportion of deaths is large, but it must be remembered that, as a rule, only the severer cases are recognized and that, perhaps in the majority of instances, treatment is by no means of the best, or thoroughly applied. The comparative mildness of the type of the disease is, I think, shown by the facts, among others, that general septic infection is infrequent, post-diphtheritic paralysis almost unknown, and that epidemic tendency, even to the extent of the attack of more than one member of the same household, is rarely met with.

It will be noticed that scarlet fever does not appear in the list of infectious diseases reported upon. This is due to the excessive rarity of the malady in the island empire, where, though it is not absolutely unknown, a lifetime may be spent in the practice of medicine without encountering a single case, and where, even when it occurs, the type is almost invariably of the mildest and the appearance of the disease in epidemic form unheard of.

I am, sir, very respectfully,

STUART ELDRIDGE, M. D.,  
*Sanitary Inspector, U. S. M. H. S.*

MEXICO.

*Denial of report of existence of yellow fever in Vera Cruz.*

VERA CRUZ, MEXICO, *March 27, 1896.*

SIR: There were rumors this morning that yellow fever had appeared in this city, but I am glad to say that such is not the truth. I have visited the hospitals and inquired of the leading physicians, and am assured that there is not a case. \* \* \*

Last year the papers were full of reports about this disease, when the fact was that there was less of it than for several years previous. I have facilities for knowing, and report to you weekly the condition of this port, and am sure these reports are reliable. \* \* \*

Very respectfully,

CHARLES SCHAEFER,  
*United States Consul.*

TURKEY.

*Sanitary report.*

(Report No. 148.)

CONSTANTINOPLE, *March 11, 1896.*

The epidemic of influenza still prevails in Constantinople. Many cases of diphtheria do exist, also, and I have seen a few cases of whooping cough. One or two deaths from smallpox occur every week. There have been also some deaths from puerperal fever.

At Duzjéh, in the vilayet of Bolu (Asia Minor), a disease broke out (as it is officially announced) from which several deaths took place. When further details arrive I will report them.

In Alexandria (Egypt) no cholera case has been registered since the 3d inst. As a consequence of the news, the international sanitary board has abolished the forty-eight hours' quarantine to which the passengers coming from the latter town were submitted. They have to undergo only a medical visit, disinfection of their wearing apparel, and twenty-four hours of observation.

SPIRIDION C. ZAVITZIANO.

#### STATISTICAL REPORTS.

BAHAMAS—*Green Turtle Cay—Abaco*.—Two weeks ended March 26, 1896. Estimated population, 3,900. No deaths.

BERMUDA.—Week ended March 27, 1896. Estimated population, 15,013. One death. No death from contagious disease.

CANADA—*Ontario—Hamilton*.—Month of March, 1896. Estimated population, 50,000. Total deaths, 60, including phthisis pulmonalis, 7; enteric fever, 2; scarlet fever, 1, and diphtheria, 2.

CUBA—*Habana*.—Under date of April 4, 1896, the United States sanitary inspector reports as follows:

There were 644 deaths in this city during the month of March, 1896. Four of those deaths were caused by yellow fever, 16 by enteric fever, 20 by so-called pernicious fever, 3 by paludal fever, 4 by diphtheria, 38 by enteritis, 1 by dysentery, 14 by smallpox, 3 by measles, 3 by glanders, 36 by pneumonia, and 27 by grippe.

During the week ended April 2, 1896, there were 165 deaths, two of which were caused by yellow fever, 2 by enteric fever, 5 by so-called pernicious fever, 1 by paludal fever, 11 by enteritis, 1 by dysentery, 3 by smallpox, 1 by glanders, 8 by pneumonia, and 10 by grippe. The 2 deaths by yellow fever during the week occurred in the military hospital. There are strong reasons for believing that some of the deaths which are reported as having been caused by pernicious fever were in reality caused by yellow fever.

FRANCE—*Nantes*.—Month of February, 1896. Estimated population, 128,000. Total deaths, 234, including phthisis pulmonalis, 43; enteric fever, 7; diphtheria, 1, and measles, 1.

GREAT BRITAIN—*England and Wales*.—The deaths registered in 33 great towns of England and Wales during the week ended March 31 correspond to an annual rate of 19.2 a thousand of the aggregate population, which is estimated at 10,860,971. The lowest rate was recorded in Gateshead, viz, 12.7, and the highest in Norwich, viz, 26.9 a thousand.

*London*.—One thousand six hundred and three deaths were registered during the week, including measles, 129; scarlet fever, 16; diphtheria, 52; whooping cough, 102; enteric fever, 5, and diarrhea and dysentery, 17. The deaths from all causes corresponded to an annual rate of 18.8 a thousand. In greater London 2,042 deaths were registered, corresponding to an annual rate of 17.3 a thousand of the population.